

Name in Full

Certificate of Death

Mary Adams

Col

Died at Town

Grove House

County

Cecil

MARYLAND

Date 19	Month	Day	Age	Y.	M.	D.	Native of	Occupation
02	6	28	-	-	7		md	
Male	White	Married	Widow	Divorced				
Female	Colored	Single	Widower	Number of children living				

Husband of

Wife

Father's Name

George Haring

Mother's

Maiden Name

Lizzie Adams

Cause of Death

Primary

Whooping Cough

How long sick

1 day

Death

Immediate

Accident, Suicide, Homicide

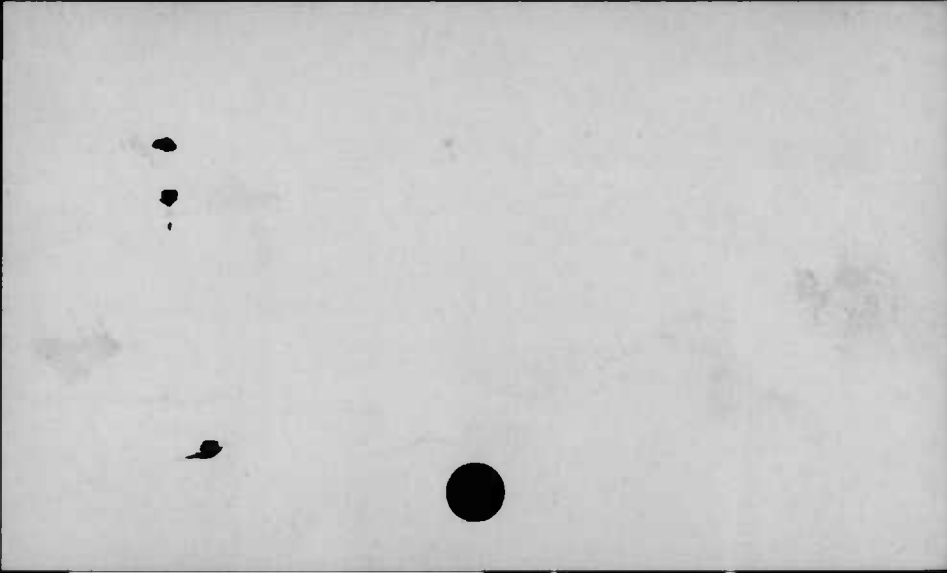
Reported by

Jno H Black, Sub Registrar

Address

Cecilton md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. ✓



Adelaide Birch

Town

County

Died at

Port Deposit

Cecil

MARYLAND

Data 1902

Month Day

Y. M. D.

Native of

Occupation

June 21

Age 16 - -

Maryland

Male

White

MarriedWidow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

Mother's

Maiden Name

Thomas Birch

Adelaide Lopez

Cause of

Primary

Epilepsy

How long sick

1 week

Death

Immediate

Exhaustion

Accident, Suicide, Homicide

Reported by

J. E. Clum

Address

Port Deposit

Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



John Bowen

Town

County

MARYLAND

Died at

Elkton

Cecil

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1902

June 8

Age

49 - - -

Del

Carpenter

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

Wm. Bowen

Mother's

Maiden Name

Elizabeth Hamilton

Cause of

Primary

Cerebral Hemorrhage

How long sick

11 days

Death

Immediate

Exhaustion

Accident, Suicide, Homicide

Reported by

Howard Bratton MD

Address

Elkton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

Died at

Date 1902

Male

~~Female~~Husband
of

Wife

Father's

Name

Cause of

Primery

Death

Immediate

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Robert Bayne

Almshurst

County

Beech

MARYLAND

Month Day

June 5-

Age 90

M. D.

Native of

Cruz

Occupation

Lumber

Married

Widow

Divorced

Single

Widower

Number of children living

Mother's

Maiden Name

General Welling

How long sick

One week

~~Accident, Suicide, Homicide~~

B. Accidents

N. E. M.

154

LIBRARY BUREAU, 79898



Name in Full

Certificate of Death

Wm J Campbell

Town

County

Died at near Woodlawn

Cecil

MARYLAND

Date 1902 Month June Day 8 Y. 77 M. D. Native of Maryland Occupation Farmer

Male White Married Widow Divorced

Female Colored Single Widower Number of children living 3

Husband of _____
Wife

Father's Name John Campbell

Mother's Name Sarah Campbell

Cause of Death { Primary Permia. 93
Immediate Emaciation.

How long sick 6 days.

Accident, Suicide, Homicide

Reported by H. C. Brown M.D.

Address Filed: 1902 Principio's Ind.

Must be signed by physician, if any in attendance, otherwise coroner, undertaker or minister.

LIBRARY BUREAU, 65988



Name in Full

Certificate of Death

David Clayton 5 dist

MARYLAND

Died at

Town *Christman*

County

Cecil

Date 19

Month *June* Day *10*

Age

Y.

M.

D.

Native of

Occupation

60

Cecil

Lumber

Male

White

Married

~~Widow~~~~Divorced~~~~Female~~~~Colored~~~~Single~~~~Widower~~

Number of children living

0

Husband

of

Wife

Father's

Name

Mother's

Maiden Name

Cause of

Primary

Paralysis

Death

Immediate

How long sick

2 years

Accident, Suicide, Homicide

Reported by

J. H. Humber

Address

W. E. Humber

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 76004



Name in Full

Certificate of Death

Charles Alaa Comerford

Town

County

Died at Chesapeake City, Cecil

MARYLAND

Date 1902	Month 6	Day 13	Age 38 8	Y.	M.	D.	Native of	Occupation
Male	White	Married	Widow				Wardens	Carpenter
Female	Colored	Single	Widow					Number of children living 2

Husband of Mary A Comerford

Wife of

Father's Name James Comerford

Mother's Maiden Name Kate Blakeman

Cause of Death { Primary Consumption

How long sick 18 mos

Death { Immediate

Accident, Suicide, Homicide

Reported by W. E. Karsner

Address Chesapeake City, Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Name in Full

Certificate of Death

Alpheus R Carothers

Town

County

5th Dist

Died at

MARYLAND

Date 1902 June 14
 Month Day Y. M. D.
 Age 45
 Native of Cecil Co
 Occupation Farmer
 Male White Married- Widowed- Divorced
 Female Colored Single- Widower Number of children living 2

Husband of

Wife

Father's

Name

Mother's

Maiden Name

Cause of Primary

Death Immediate

How long sick

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



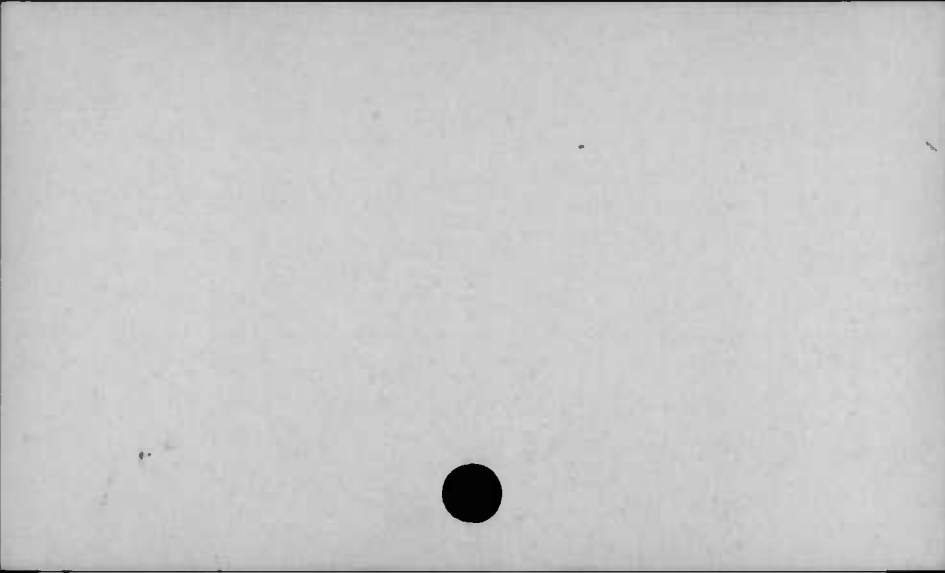
Name in Full

Certificate of Death

Name in Full *Philip B Frank* 7th Dist.
 Town *Liberty* County *Cecil* MARYLAND
 Died at *Liberty* Month *June* Day *11* Y. *24* M. *5* D. *10* Native of *Cecil* Occupation *Farmer*
 Date 19*02* Male *White* Married *Widow* Divorced *Number of children living*
 Husband of *Mrs Mary L Frank* Mother's Name *Larry Frank* Maiden Name *Mary Gillispie*
 Cause of Death { Primary *from apparent consumption of lungs* How long sick *27*
 Immediate *Consumption of lungs* Accident, Suicide, Homicide
 Reported by *Lemuel H Cox M.D.*
 Address *Post Deposit* *M.D.*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898



Name In Full

Certificate of Death

Town

County

(9th Dec)

MARYLAND

Died at

Month

Day

Y.

M.

D.

Native of

Occupation

Date 19

02

6 10

Age

32

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

Mother's

Maiden Name

Cause of

Primary

Consumption

How long sick

5 yrs

Death

Immediate

Apoplexy

Accident, Suicide, Homicide

Reported by

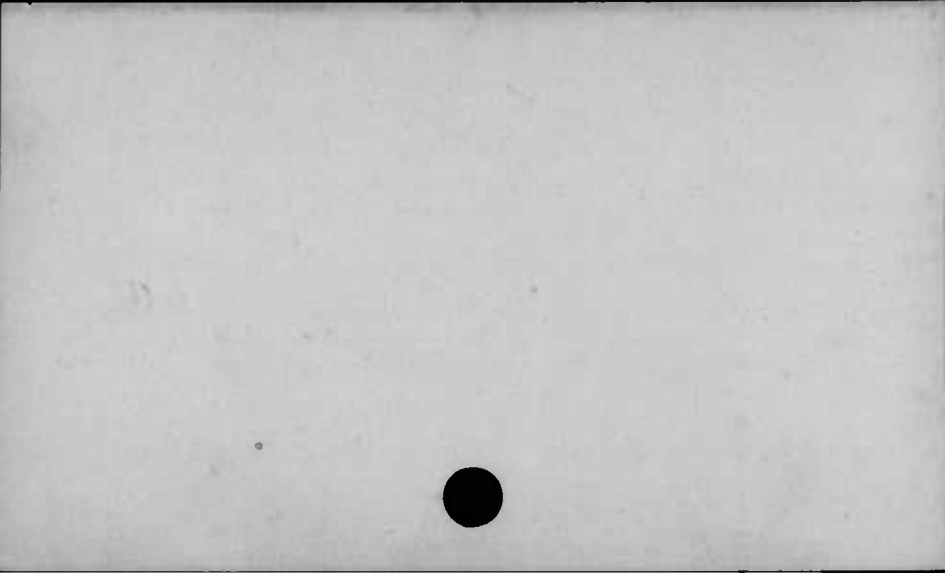
D. H. Hildner M.D.

Address

Greenwood

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898



Name in Full

Certificate of Death

David J Hutton

2 Town Dist

County

MARYLAND

Died at

near Eekton

Month

Day

Y

M.

D.

Native of

Occupation

Date 19

02

6 30

Age

63

Md

Farmer.

Male

White

~~Married~~

Widow

~~Divorced~~~~Female~~~~Colored~~

Single

~~Widow~~~~Number of children living~~

Husband

of

Wife

Father's

Name

Ringus Hutton

Mother's

Maiden Name

Eliza Biddle

Cause of

Primary

Heart disease

How long sick

Several years

Death

Immediate

Accident, Suicide, Homicide

Reported by

Howard Brannon M.D.

Address

Eekton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70000



Marion M. Jones (alias Brown)

Town

County

Died at Egleston Cecil MARYLAND

Date 1902 June 15 Age 20? Native of Occupation farm hand.

Male

~~White~~

Married

Widow

Divorced

~~Female~~

Colored

Single

Widower

Number of children living

Husband
of

Wife

Father's

Mother's

Name

Maiden Name

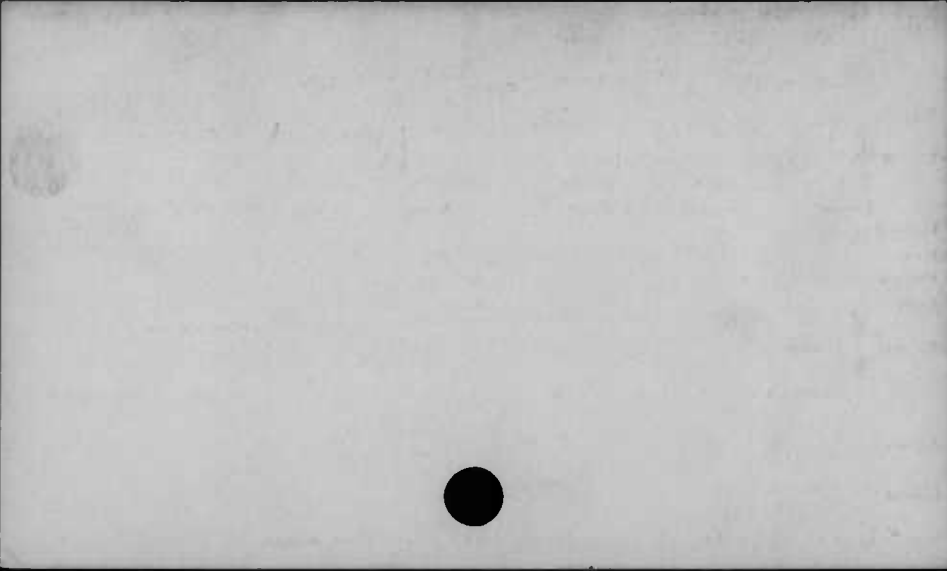
166.

Cause of Death { Primary Gun shot wound in head 27 hours
Immediate Hemorrhage and shock
How long sick
Accident, ~~Suicide~~, ~~Homicide~~

Reported by Rickette Nelson, Coroner.

Address Egleston, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

Alexander Brunton Kay
 Town Rising Sun County Cecil 6th Dist
 Died at

MARYLAND

Date 1902, June 3, Age 79, Y. M. D. 5-
 Male White Married Widowed Divorced
 Female Colored Single Widower
 Native of Scotland Occupation Papermaker
 Number of children living 7.

Husband of Elizabeth Talmadge
 Wife Robert Kay
 Father's Name Robert Kay Mother's Maiden Name Elizabeth Cook

Cause of Death { Primary Asthma. Euphymania days & months
 Immediate Exacerbation.
 How long sick
 Accident, Suicide, Homicide

Reported by J. B. Allen M.D.
 Address Rising Sun Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Harriet E. Moore

Town

Cecilton

County

Cecil

MARYLAND

Died at

Date 1902

Month

June 25

Day

Y.

M.

D.

Native of

Occupation

Age

1. 2.

County

~~Male~~~~White~~

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Wife

Father's

Name

Fannie Moore

Mother's

Maiden Name

Charlotte Moore

Cause of

Primary

Pericarditis

How long sick

3 weeks

Death

Immediate

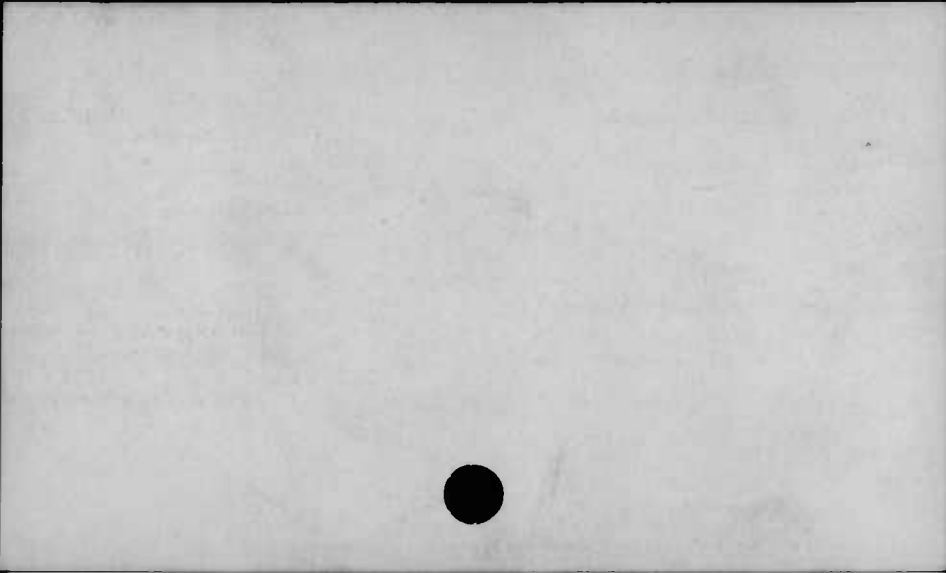
8

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Katie Elizabeth Morris.

Town

County

Died at

Mor. Earleville

Cecil

MARYLAND

Date 1902

Month

Day

Y.

M.

D.

Native of

Occupation

6

12

Age

14.9

Md

Schoolgirl

Male

~~White~~~~Married~~

Widow

~~Divorced~~

Female

Colored

Single

Widower

Number of children living

Husband
of

Wife

Father's

Name

Robert Morris

Mother's

Maiden Name

Janie Anderson

Cause of

Primary

Pneumonia

How long sick

10 weeks

Death

Immediate

Consumption

~~Accident, Suicide, Homicide~~

Reported by

R.M. Black

Address

Cecilton

93

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. ✓



Name In Full

Hannah Alban (Hannah Kalaou)

Certificate of Death

Died at

Town

Port-Depot

County

Cecil

MARYLAND

Date

Month

Day

Y.

M.

D.

Native of

Occupation

June 2

June 16

Age 44

Port-Depot Labor

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living 1

Husband
of
WifeFather's
Name

Henry Alban

Mother's
Name

Mary Alban

Cause of

Primary

Heart Disease

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

J. E. Clinchman

Address

Port-Depot

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79805

Attended by Dr. _____

of _____

Seen by Coroner _____

of _____

Information contained in this certificate re-
ceived from _____

of _____

George H Gimpers b dist

Town

County

MARYLAND

Died at

North East

Cecil Co

Date

1902 June 27th.

Month

Day

Y.

M.

D.

Native of

Occupation

Age

65 years

Cecil Md

Farmer

Male

White

Married

~~Widow~~~~Divorced~~~~Female~~~~Colored~~~~Single~~~~Widower~~

Number of children living

One

Husband

of

Wife

Father's

Name

Sarah E Gimpers

Mother's

Maiden Name

Mary Gimpers

Cause of

Primary

Heart

Death

Immediate

How long sick

1 year

~~Accident~~ ~~Suicide~~ ~~Homicide~~

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

John H. Price

Town

County

Died at near Cecil

MARYLAND

Date 1892 6, 12, Age 64, 6-6 state Farmer
 Male White Married Widower
 Number of children living 3

Husband of Mary H. Price
 Wife

Father's Name Lewis Mother's Name Salina

Cause of Death { Primary Chorea of Lungs
 Immediate Dropsy
 How long sick 4 weeks
 Asphyxia, Cerebral Hemorrhage

Address Lexington, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79896



Frances Smith

Town

County

Died at

Pineville

Cecil

MARYLAND

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1962

June 22

Age

- 10 -

Maryland

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

James Smith

Mother's

Maiden Name

Bellie Jackson

Cause of

Primary

Pulmonary, Tuberculosis

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

Geo W. Stanley

Address

Perryville

Must be signed by physician, if any in attendance, otherwise by _____, oner, undertaker or minister.



Name in Full

Certificate of Death

Hannah Harburtor

Town

County

Died at Near Pleasant Hill Cecil

MARYLAND

Date 1902 Month 6 Day 8 Y. M. D. Age 59 Native of Occupation

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Wife

Father's Name

Mother's

Maiden Name

Cause of Primary

Death Immediate

How long sick

about 1 week

Accident Suicide Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 76008



Mary E Waters

Town

County

Died at

New Berlin

Berlin

MARYLAND

Date 19

02

Month

Day

Y.

M.

D.

Native of

Occupation

June 23

Age

20

Md

Housewife

Male

~~White~~

Married

Widow

~~Divorced~~

Female

Colored

~~Single~~

Widower

Number of children living

2

Husband

of

Wife

Silbert Waters

Father's

Name

Charles Potts

Mother's

Maiden Name

Fanny Trueson

Cause of

Primary

Died in Confinement

How long sick

1 day

Death

Immediate

Eclampsia 138

Accident, Suicide, Homicide

Reported by

H. C. Waters

J. H. Hargill
md

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Sarah Ann Wilkinson

Town

County

Died at

Lombard

Cecil (9th)

MARYLAND

Date 19

02

Month

Day

June 29

Age

Y.

M.

D.

75 9 18

Native of

Delaware

Occupation

~~Male~~

White

~~Married~~

Widow

~~Divorced~~~~Female~~~~Colored~~~~Single~~~~Widower~~

Number of children living

3

Husband

of

Wife

Father's

Name

John Milton Wilkinson

Mother's

Thomas Palmer

Maiden Name

Anna Mitchell

Cause of

Primary

Old Age

154

How long sick

3 weeks.

Death

Immediate

Worn out system

Accident, Suicide, Homicide

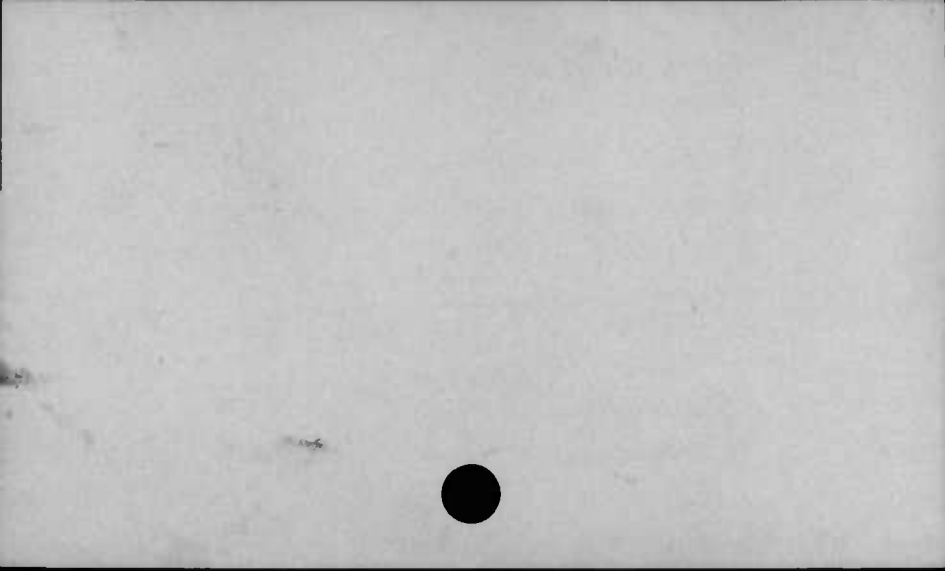
Reported by

Chas G Miller Jn D

Address

Zion Cecil Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full George E Welton
 Died at Rolandville Cecil 8th Dist MARYLAND
 Date 1902 June 3 1902 15 Maryland
 Male White Married Widow Engaged
 Female Colorad Single Widower Number of children living
 Husband of George E Welton
 Wife Deceased
 Father's Name George E Welton Mother's Maiden Name Frankina Welton
 Cause of Death { Primary Marasmus Immediate Marasmus with acute gastroenteritis How long sick Since March 4
 Accident, Suicide, Homicide 02
 Reported by Linnell A Cox Calverton
 Address Port Deposit Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Unknown White Man

Town

County

Died at

Perryville

Beebe

MARYLAND

Date 19

02

Month

Day

Age

Y.

M.

D.

Native of

Occupation

Date 19

02

June 16

Age

45?

Male

White

Married

~~Widow~~

Divorced

~~Female~~~~Colored~~

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

Mother's

Maiden Name

Cause of

Primary

Crushed by cars at

How long sick

Death

Immediate

Perryville Station

Accident, Suicide, Homicide

Reported by

Ricketta Nelson, Coroner

Address

Eldon, Md

Must be signed by physician, If any in attendance, otherwise by coroner, undertaker or minister.

N. C. Clifton Jackson, Eng